

WPA public health mission to emphasize the importance of risk factors and to adopt evidence-based preventive and rehabilitative interventions.

The WPA Working Group on IDD has participated this year in the initiative called Rehabilitation 2030, sponsored by the WHO Department of Noncommunicable Diseases, Disability, Violence, and Injury Prevention, aiming to develop a package of rehabilitative interventions<sup>7</sup> along with specified resource requirements for their delivery. The overarching goal is the improved care of persons with IDD across the lifespan, with a particular emphasis on LMICs.

Following on these ground-breaking approaches in classification and evidence-based interventions, the Working Group is now promoting a second paradigm shift aiming to include training on IDD within mainstream psychiatry, once again with a particular emphasis on LMICs.

Three important arguments justify this call. First, when polled about their knowledge on the impact of IDD, many trainees in psychiatry recognize the disproportionately high burden of co-occurring mental disorders in persons with IDD<sup>8</sup>. Second, when offered opportunities to interact with persons with IDD during rotations, many trainees in psychiatry regard such experiences as highly formative and inspiring. Third, and most important, psychiatry as a profession has the potential to improve significantly the care for persons with IDD.

Furthermore, the gap in mental health services for persons with IDD is too significant to be compensated by an *ad hoc* reliance on individual providers and families, and their resilience is not limitless. Moreover, within the context of the COVID-19 pandemic, persons with IDD are facing the

utmost intensification of inequities in terms of underlying medical liabilities, inability to socially distance, increased infection and mortality risks, challenges to participate in telehealth services, and ensuing social isolation and adverse mental health outcomes<sup>9</sup>.

The Working Group and the WPA leadership invite Member Societies to work collectively to enhance efforts for the development of inclusive training models in the mental care of persons with IDD. The Working Group is ready to provide awareness raising, training, and research collaboration to promote and disseminate effective services and thereby improve the lives and outcomes for persons with IDD. For this purpose, the Working Group is developing an open access handbook focusing on global aspects of the psychiatry of IDD, with authorship from both LMICs and high-income countries. In parallel, the Working Group is developing online educational materials summarizing the key aspects of psychiatric care in people with IDD. These resources will be accessible through the WPA educational portal in 2022.

The WPA Working Group on IDD encourages systematic exposure to and experience in this area for all psychiatrists, so that they can adjust treatments for co-occurring mental disorders and avoid diagnostic overshadowing in which IDD may be wrongly considered the cause of all behavioural problems, and psychiatric, physical as well as environmental factors may be overlooked. Since relatives remain key partners as well as co-providers of services for people with IDD throughout their lives, the Working Group encourages provision of support to families by using local networks, with access to specialists for training and supervision as well as to more intensive forms of treatment for co-occurring prob-

lems (e.g., autism spectrum and seizure disorders)<sup>7</sup>. Third, the Working Group calls for the development of targeted mental health services including psychiatrists and allied professionals, who will need additional training to improve their diagnostic and therapeutic skills relevant to IDD. Finally, the Working Group emphasizes the need for person-centered care tailored on abilities and aspirations of affected persons, blending the social and medical models of development and disability within a human rights framework to improve access to health care, education and employment.

These themes have been the subject of presentations in Presidential and State-of-the-Art Symposia at the World Congress in Lisbon, and subsequently at the World Congresses in Bangkok, Thailand in March 2021, and Cartagena, Colombia in October 2021, and will continue to be addressed by the Working Group at forthcoming WPA congresses and conferences.

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## WPA Working Group on Medical Students: current initiatives and future priorities

Psychiatric issues impact individuals of all ages globally. Shortage of mental health professionals is a major concern especially in low- and middle-income countries. Fur-

ther, the COVID-19 pandemic has led to downsizing and even closure of various mental health services worldwide<sup>1-4</sup>. In the WPA Action Plan 2020-2023, capacity build-

ing and promotion of psychiatry among medical students is an important pillar<sup>5,6</sup>. To this aim, a WPA Working Group on Medical Students has been created. The inau-

gural meeting of this group was held on December 21, 2020, attended by the WPA President. This was followed by regular meetings.

The remit of this Working Group includes four components: to identify opportunities for promoting psychiatry as a career among medical students; to identify organizations and individuals interested in participating and promoting WPA's Action Plan in nurturing psychiatry among medical students; to liaise with other WPA Working Groups regarding medical students; and to support medical students around the world.

Since the beginning of 2019, COVID-19 has caused significant disruptions in the day-to-day lives of millions of people around the world. Medical education is not an exception in this regard. The pandemic has impacted on in-person learning, medical school examinations, clinical rotations, faculty availability for supervision and future placements<sup>7</sup>.

The pandemic has also impacted on the emotional well-being of medical students. A study done by members of our Working Group among 1,100 medical students from five medical schools in Pakistan found high rates of anxiety (48.6%) and depressive symptoms (48.1%) during the COVID-19 pandemic. The study included 69% female and 31% male medical students, with approximately 25% reporting past psychiatric issues. One of the most concerning observations was that one in five medical students thought that it would be better if they were dead and 8% often thought about suicide during the past 2 weeks<sup>8</sup>. It is imperative that medical schools develop strategies and support systems to maintain medical student well-being.

A major highlight of the activity of our Working Group has been the release of a promotional video for medical students entitled *Why Psychiatry*. This video was created to share perspectives from seasoned faculty, psychiatry trainees and medical students on the importance of supporting the psychiatry workforce around the world. Interviews included key themes encompassing medical student mental health, the diversity of psychiatric subspecialties, the interface of mental health with social

determinants of health, and opportunities to partner with primary care providers. A consistent message was the critical shortage of psychiatrists and the need to support workforce development to address mental health needs. This video is available in English, French, Spanish and Russian for medical educators to share with their trainees and medical students ([www.wpanet.org/post/why-psychiatry-medical-student-group-video-now-available-online](http://www.wpanet.org/post/why-psychiatry-medical-student-group-video-now-available-online)).

In addition to the video, the Working Group is developing a set of online tools for psychiatric educators. The first of these tools is an interactive self-learning module on the well-being of medical students, which is now available on the WPA educational portal. Self-care and wellness are often ignored in the formal medical school curricula<sup>9</sup>. The current pandemic has increased the visibility of burnout and depression in the health care workforce. This module plans to encourage educators and policy makers to implement student wellness policies and to support a learning environment which nurtures emotional and physical well-being.

In order to augment the virtual resources, the Working Group has organized three in-person events to promote psychiatry among medical students and address burnout. These inaugural events were held in Pakistan, India and Qatar, with active participation from local medical students, who provided input on core topics. These events also served as a platform to support and mentor medical students interested in psychiatry.

The Working Group is active in publishing peer-reviewed articles, covering areas such as promoting psychiatry among medical students and the impact of COVID-19 on medical students<sup>10,11</sup>. Additional research articles are planned and underway. All of the activities and initiatives of the Working Group are accessible on the dedicated section of the WPA website ([www.wpanet.org/wg-on-medicalstudents](http://www.wpanet.org/wg-on-medicalstudents)).

The Working Group has been active in presenting invited and peer-reviewed abstracts and symposia around the world. This included presidential and other symposia on psychiatry capacity building and medical education themes at the World

Congresses in Bangkok, Thailand in March 2021, and Cartagena, Colombia in October 2021. Abstracts on the promotion of psychiatry were presented at the annual conferences of the Association of University Teachers of Psychiatry Annual Conference, UK in February 2021; at the WPA Regional Conference, Russia in May 2021; and at the 67th Virtual American Academy of Child and Adolescent Psychiatry Conference in October 2021. An innovative contest was held among medical students in Mexico to submit papers on "The Role of Psychiatry after the Pandemic". The top three papers were recognized during the 27th Congress of the Mexican Psychiatric Association in September 2021.

Future directions include: a) to create online self-learning modules on "stigma" and "burnout" for medical students; b) to conduct a survey about psychiatry curriculum in medical education across medical schools in different countries; c) virtual and in-person activities to promote psychiatry among medical students and to address burnout among students; d) to liaison with regional and international organizations to promote psychiatry; e) presentations at the WPA congresses and other national and international conferences; and f) social media and video campaigns to promote psychiatry.

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## WPA Working Group on Public Mental Health: objectives and recommended actions

Mental disorder is reported to account for almost a third of global disease burden as measured by years lived with disability (YLDs)<sup>1</sup>. On the other hand, mental well-being results in broad positive impacts<sup>2</sup>. Effective public mental health interventions exist to treat mental disorder, prevent associated impacts, prevent mental disorder from arising, and promote mental well-being and resilience<sup>2,3</sup>.

However, only a minority of those with mental disorder receive treatment, with far lower coverage in low- and middle-income countries (LMICs)<sup>4</sup>. There is even less coverage of interventions to prevent associated impacts of mental disorder, and negligible coverage of interventions to prevent mental disorder, or promote mental well-being and resilience. This implementation gap represents a breach of the right to health, and results in population-scale suffering and associated economic costs<sup>3</sup>. The gap has further widened during the COVID-19 pandemic<sup>5-7</sup>.

The United Nations (UN) Sustainable Developmental Goals have set a target of universal coverage by 2030 which includes treatment and prevention of mental disorder and promotion of mental well-being. The most recent World Health Organization (WHO) Mental Health Atlas highlighted that “global targets can be reached in 2030 only if there is a collective global commitment over the next 10 years across Member States to make massive investments and expanded efforts at the country level relating to mental health policies, laws, programmes and services”<sup>4</sup>.

Public mental health involves a population approach to improve coverage, outcomes and coordination of interventions to treat mental disorder, prevent associated impacts, prevent mental disorder from arising, and promote mental well-being and resilience. This aims to support efficient,

equitable and sustainable reduction in mental disorder, promotion of population mental well-being, and achievement of the UN Sustainable Developmental Goals target of universal coverage by 2030<sup>3</sup>.

The WPA Action Plan 2020-2023 promotes public mental health as a guiding principle<sup>8,9</sup>. A Working Group on Public Mental Health has been then established, including experts such as J. Allan, F.K. Baingana, J. Campion, Y. Huang, A. Javed, N. Lamb, S. Levin, C. Lund, M. Marmot, S. Saxena, T. Schulze, E. Sorel, H. Tu, P. Udomratn, and M. van Ommeren (observer).

The Working Group highlighted that public mental health is not well defined or understood, with some languages having no terms for it. This contributes to lack of action on relevant issues. The Group agreed upon the definition outlined above, which is reported on the Group webpage of the WPA website ([www.wpanet.org/public-mental-health](http://www.wpanet.org/public-mental-health)) and in a recent publication<sup>3</sup>.

The main objective of the Working Group is to improve implementation of public mental health interventions in four ways. The first is to raise awareness, value, acceptance and prioritization of this area in national health policies. The second is to promote national assessments of public mental health unmet need and required actions which can then inform policy development and implementation. The third is to promote public mental health training, including through digital platforms, which can support psychiatrists and other professionals to address the public mental health implementation gap, particularly in LMICs, through identification of required actions by different sectors as well as clarification of a core curriculum, training targets and milestones. Examples of public mental health training are highlighted on the above-mentioned Group webpage. The fourth way is to support development of in-

tegrated public mental health approaches to disease management and prevention including through engagement with primary and general health systems.

Further objectives include: a) work with interested countries in order to facilitate these approaches with identified funding; b) engagement with other organizations on the public mental health agenda – thus far, these have included the Organization for Economic Co-operation and Development (OECD), the UN International Children’s Emergency Fund (UNICEF), and the WHO; c) disseminating work relevant to public mental health through publications, presentations and training, also delivered online; d) supporting a public mental health approach in other areas of the WPA Action Plan 2020-2023, including child, adolescent and youth mental health, the management of comorbidities, and partnership with other organizations.

Publications already produced by the Working Group include an editorial on the field as a whole<sup>10</sup>, articles dealing with the public mental health approach to the COVID-19 pandemic<sup>11-13</sup>, and papers about required actions to address public mental health implementation failure<sup>3,14</sup>. Members of the Working Group have given and will give presentations at World Congresses of Psychiatry in 2021 and 2022, and will present in a public mental health symposium at the 2022 International Congress of the UK Royal College of Psychiatrists.

In order to achieve consensus on required actions to address the public mental health implementation gap, the members of the Working Group were invited to contribute to a health policy article<sup>3</sup>, which recommends the following six actions: a) making the public mental health case through assessment of unmet need, estimation of impact and associated economic benefits from improved coverage, as well as collabo-